# FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

ONGE OF SALE OF SECURITIES PUKSÚANT TO REGULATION D. **SECTION 4(6), AND/OR** FORM LIMITED OFFERING EXEMPTION

RECEIVED

| 11/4/////         |              |  |  |  |  |  |  |
|-------------------|--------------|--|--|--|--|--|--|
| OMB APPROVAL      |              |  |  |  |  |  |  |
| OMB Number:       | 3235-0076    |  |  |  |  |  |  |
| Expires:          | May 31, 2007 |  |  |  |  |  |  |
| Estimated average | burden hours |  |  |  |  |  |  |
| per response      | 1            |  |  |  |  |  |  |
|                   |              |  |  |  |  |  |  |

|        | SEC USE ONLY  |        |
|--------|---------------|--------|
| Prefix |               | Serial |
|        |               |        |
|        |               |        |
|        | DATE RECEIVED |        |
|        |               | :      |

| Name of Offering ( check if this is an amendment and name has changed, and indicate cha Sale of Series A Convertible Preferred Stock and Warrants to purchase Common Stock                            |   |
|---|---|
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 500  Type of Filing: New Filing Amendment   | 6 Section 4(6) PROGESSED                                    |
| A. BASIC IDENTIFICATION DATA  | MAY 3 1 2007  |
| 1. Enter the information requested about the issuer   | E THOMSON   |
| Name of Issuer ( check if this is an amendment and name has changed, and indicate chan NATURAL HEALTH TRENDS CORP.  |   |
| Address of Executive Offices (Number and Street, City, State, Zip Code 2050 Diplomat Drive, Dallas, Texas 75234   | e) Telephone Number (Including Area Code)<br>(972) 241-4080 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)  | e) Telephone Number (Including Area Code)                   |
| Brief Description of Business Direct selling of personal care and wellness products   |   |
| Type of Business Organization   | ease specify): limited liability company                    |
| Actual or Estimated Date of Incorporation or Organization:  Jurisdiction of Incorporation or Organization:  (Enter two-letter U.S. Postal Service abbreviat CN for Canada; FN for other foreign juris |   |

# **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulatic et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offerir U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at tl at that address after the date on which it is due, on the date it was mailed by United States registered or ce



he

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

| <u></u>  | A. BASIC IDEN                   | TIFICATION DATA              |                   |                                    |
|--|---------------------------------|------------------------------|-------------------|------------------------------------|
| 2. Enter the information requested for the                                 | ne following:                   |                              |                   |                                    |
| • Each promoter of the issuer, if  | the issuer has been organized   | within the past five years;  |                   |                                    |
| • Each beneficial owner having securities of the issuer;                   | the power to vote or dispose    | e, or direct the vote or dis | sposition of, 10% | or more of a class of equity       |
| Each executive officer and dire  | ctor of corporate issuers and o | of cornorate general and ma  | anaging nartners  | of partnership issuers; and        |
| Each general and managing par  | •                               | or portito general and in    | anaging paraners  | or paratoromp toodors, and         |
|  | <u>`</u>                        |                              |                   | □ C11/                             |
| Check Box(es) that Apply: Promo  | ter Beneficial Owner            | Executive Officer            | ☐ Director        | ☐ General and/or  Managing Partner |
| Full Name (Last name first, if individual Sharng, Chris T.                 |                                 |                              | •                 |                                    |
| Business or Residence Address (Numbe 2050 Diplomat Drive, Dallas, TX 7523  |                                 | Code)                        |                   |                                    |
| Check Box(es) that Apply: Promo  |                                 | Executive Officer            | Director          | General and/or Managing Partner    |
| Full Name (Last name first, if individual Davidson, Timothy S.             | )                               |                              |                   |                                    |
| Business or Residence Address (Number 2050 Diplomat Drive, Dallas, TX 7523 |                                 | Code)                        |                   |                                    |
| Check Box(es) that Apply: Promo  |                                 | Executive Officer            | Director          | General and/or Managing Partner    |
| Full Name (Last name first, if individual Wallace, Gary C.                 | )                               |                              |                   |                                    |
| Business or Residence Address (Number 2050 Diplomat Drive, Dallas, TX 7523 |                                 | Code)                        |                   |                                    |
| Check Box(es) that Apply: Promot   |                                 | Executive Officer            | ☐ Director        | General and/or Managing Partner    |
| Full Name (Last name first, if individual Cavanaugh, John                  | )                               |                              |                   |                                    |
| Business or Residence Address (Number 2050 Diplomat Drive, Dallas, TX 7523 |                                 | code)                        |                   |                                    |
| Check Box(es) that Apply: Promot   |                                 |                              | Director          | General and/or Managing Partner    |
| Full Name (Last name first, if individual Broome, Curtis                   | )                               |                              |                   |                                    |
| Business or Residence Address (Number 2050 Diplomat Drive, Dallas, TX 7523 |                                 | ode)                         |                   |                                    |
| Check Box(es) that Apply: Promot   | _                               | Executive Officer            | Director          | General and/or Managing Partner    |
| Full Name (Last name first, if individual Martino, Anthony B.              | )                               |                              |                   |                                    |
| Business or Residence Address (Number 2050 Diplomat Drive, Dallas, TX 7523 |                                 | ode)                         | •                 |                                    |
| Check Box(es) that Apply: Promot   |                                 | Executive Officer            | Director          | General and/or Managing Partner    |
| Full Name (Last name first, if individual Mason, Randall A.                | )                               |                              |                   |                                    |
| Business or Residence Address (Number 2050 Diplomat Drive, Dallas, TX 7523 |                                 | ode)                         |                   |                                    |
| Check Box(es) that Apply: Promot   |                                 | Executive Officer            | Director          | General and/or Managing Partner    |
| Full Name (Last name first, if individual Wolfson, Sir Brian               | )                               |                              |                   |                                    |
| Business or Residence Address (Number 2050 Diplomat Drive, Dallas, TX 7523 | · • · · · · · · -               | ode)                         |                   |                                    |

|        |                           |              |              |              | В.           | INFOR        | MATIO        | N ABOU       | T OFFE       | RING           |              |              |              |           |  |
|--------|---------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|----------------|--------------|--------------|--------------|-----------|--|
|        |                           |              |              |              |              |              |              |              |              |                | ,            |              |              | Yes       | No                                     |
| 1. I   | las the issu              | ier sold,    | or does t    | he issuer    | intend to    | sell, to n   | on-accre     | dited inve   | stors in t   | his offeri     | ng?          |              | •••••        |           | $\boxtimes$                            |
|        |                           |              |              |              |              | -            | •            |              |              | under U        |              |              |              |           |  |
| 2. \   | What is the               | minimu       | m investr    | nent that    | will be a    | ccepted f    | rom any      | individua    | 1?           |                |              | ••••••       |              |           |  |
| 3. I   | Does the of               | Ferina ne    | emit ioin    | t oumerel    | in of a c    | inale unit   | .9           | •            |              |                |              |              |              | Yes<br>⊠  | No<br>□                                |
|        | Enter the in              |              |              |              |              |              |              |              |              |                |              |              |              |           | ப<br>or simila                         |
| r      | emuneratio                | on for so    | licitation   | of purch     | asers in     | connectio    | n with s     | ales of se   | curities i   | n the off      | ering. If    | a person     | to be lis    | ted is an | associated                             |
|        | person or a<br>han five ( |              |              |              |              |              |              |              |              |                |              |              |              |           |  |
|        | lealer only               |              | is to be i   | isied are    | associate    | a person     | s or such    | a DIOKE      | or ucare     | a, you in      | ay set ic    | nui uic ii   | normano      | i ioi uia | it bloker o                            |
|        | Name (Las<br>Applicable   |              | rst, if ind  | ividual)     |              |              | •            |              | -            |                |              |              |              |           |  |
| Busir  | néss or Res               | idençe A     | ddress (1    | Number a     | nd Street    | , City, St   | ate, Zip (   | Code)        |              |                |              |              |              |           |  |
|        |                           |              |              |              |              |              | _            |              |              |                |              |              |              |           | <del>.</del>                           |
| Name   | e of Associ               | ated Bro     | ker or De    | ealer        |              |              |              |              |              |                |              |              |              |           |  |
| States | s in Which                | Person I     | Listed Ha    | s Solicite   | d or Inte    | nds to So    | licit Purc   | hasers       |              |                |              | <del></del>  |              |           |  |
|        | Check "Al                 |              |              |              |              |              |              |              |              |                |              |              |              |           | All States                             |
|        | [AL]                      | [AK]         | [AZ]         | [AR]         | [CA]         | [CO]         | [CT]         | [DE]         | [DC]         | [FL]           | [GA]         | [HI]         | [ID]         |           |  |
|        |                           | [IN]         | [IA]         | [KS]         | [KY]         | [LA]         | [ME]         | [MD]         | [MA]         | [MI]           | [MN]         | [MS]         | [MO]         |           |  |
|        | [MT]<br>[RI]              | [NE]<br>[SC] | [NV]<br>[SD] | [NH]<br>[TN] | [NJ]<br>[TX] | [NM]<br>[UT] | [NY]<br>[VT] | [NC]<br>[VA] | [ND]<br>[WA] | [OH]<br>[WV]   | [OK]<br>[WI] | [OR]<br>[WY] | [PA]<br>[PR] |           |  |
|        | Name (Las<br>Applicable   |              | rst, if ind  | ividual)     |              | <u> </u>     |              |              |              |                |              |              |              |           |  |
| Busir  | ess or Res                | idence A     | ddress (1    | Number a     | nd Street    | , City, St   | ate, Zip (   | Code)        |              |                |              |              |              |           |  |
| Name   | e of Associ               | ated Bro     | ker or De    | aler         | <u> </u>     |              |              | <del></del>  |              | <del>, ,</del> |              |              | <del></del>  |           |  |
| States | s in Which                | Person I     | isted Ha     | s Solicite   | d or Inter   | nds to So    | licit Purc   | hasers       | <u> </u>     | <del></del>    |              |              | ·            |           |  |
|        | Check "Al                 |              |              |              |              |              |              |              |              |                |              |              |              | 🔲 .       | All States                             |
|        | [AL]                      | [AK]         | [AZ]         | [AR]         | [CA]         | [CO]         | [CT]         | [DE]         | [DC]         | [FL]           | [GA]         | [HI]         | [ID]         |           |  |
|        | [IL]                      | [IN]         | [IA]         | [KS]         | [KY]         | [LA]         | [ME]         | [MD]         | [MA]         | [MI]           | [MN]         | [MS]         | [MO]         |           |  |
|        | [MT]<br>[RI]              | [NE]<br>[SC] | [NV]<br>[SD] | [NH]<br>[TN] | [NJ]<br>[TX] | [NM]<br>[UT] | [NY]<br>[VT] | [NC]<br>[VA] | [ND]<br>[WA] | [OH]<br>[WV]   | [OK]<br>[WI] | [OR]<br>[WY] | [PA]<br>[PR] |           |  |
|        | Vame (Last                | name fi      |              |              |              |              |              |              |              |                |              |              |              |           |  |
|        | Applicable                |              |              |              |              |              |              |              |              |                |              |              |              |           |  |
| Busin  | ess or Res                | idence A     | ddress (1    | Number a     | nd Street,   | , City, Sta  | ite, Zip C   | lode)        |              |                |              |              |              |           |  |
| Name   | of Associ                 | ated Bro     | ker or De    | aler         |              |              |              | ·            | •            |                |              |              |              | •         | ·• • • • • • • • • • • • • • • • • • • |
| States | s in Which                | Person I     | isted Ha     | s Solicite   | d or Inter   | nds to So    | licit Purc   | hasers       | . <u> </u>   |                |              |              |              |           | -                                      |
| (      | Check "Al                 | l States"    | or check     | individua    | l States).   |              |              |              |              |                |              | ••••••       | ·····        | 🔲 🗸       | All States                             |
|        | [AL]                      | [AK]         | [AZ]         | [AR]         | [CA]         | [CO]         | [CT]         | [DE]         | [DC]         | [FL]           | [GA]         | [HI]         | [ID]         |           |  |
|        | [IL]                      | [IN]         | [IA]         | [KS]         | [KY]         | [LA]         | [ME]         | [MD]         | [MA]<br>[ND] | [MI]<br>[OH]   | [MN]<br>[OK] | [MS]<br>[OR] | [MO]<br>[PA] |           |  |
|        | [MT]<br>[RI]              | [NE]<br>[SC] | [NV]<br>[SD] | [NH]<br>[TN] | [NJ]<br>[TX] | [NM]<br>[UT] | [NY]<br>[VT] | [NC]<br>[VA] | [WA]         | [WV]           | [WI]         | [WY]         | [PR]         |           |  |

| 1. | Enter the aggregate offering price of securities included in this offering and the total amo already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the security offered for exchange and already exchanged.                                | inge          |                             | •••               | 3                      |
|----|---|---------------|-----------------------------|-------------------|------------------------|
|    | Type of Security  |               | Aggregate<br>Offering Price |                   | Amount<br>Already Sold |
|    | Debt \$   | \$            | -0-                         | \$                | -0-                    |
|    | Equity Series A Convertible Preferred Stock \$  | š             | \$818,271.20                | - s               | \$818,271.20           |
|    | ☐ Common ☑ Preferred  | Н             |                             | _ `-              |                        |
|    |   | e<br>e        | 04.01                       | •                 | Ø4.01                  |
|    | Convertible Securities (including warrants) Warrants to purchase Common Stock   | »<br>—        | \$4.81                      | — ¸¸ -            | \$4.81                 |
|    | Partnership Interests \$  | »<br>         | -0-                         | — "-              | -0-                    |
|    | Other (Specify)   | <u>ን</u>      | -0-                         | _ <sup>\$</sup> - | -0-<br>-0-             |
|    | Other (Specify) S   | <u>ያ</u>      |                             | — ၞ-              |                        |
|    | ***************************************   | <b>&gt;</b>   | \$818,276.01                | — <sub>2</sub> -  | \$818,276.01           |
|    | Answer also in Appendix, Column 3, if filing under ULOE.  |               |                             |                   |                        |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securi in this offering and the aggregate dollar amounts of their purchases. For offerings un Rule 504, indicate the number of persons who have purchased securities and the aggreg dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."        | nder<br>gate  |                             |                   | Aggregate              |
|    |   |               | Number of                   |                   | Dollar Amount          |
|    |   |               | Investors                   | •                 | of Purchases           |
|    | Accredited Investors  |               | 11                          | \$                | \$818,276.01           |
|    | Non-accredited Investors  |               | -0-                         | _ `s -            | -0-                    |
|    | Total (for filings under Rule 504 only) Not Applicable  |               | N/A                         | - \$ -            | N/A                    |
| 3. | Answer also in Appendix, Column 4, if filing under If this filing is for an offering under Rule 504 or 505, enter the information requested for securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (months prior to the first sale of securities in this offering. Classify securities by type listed Part C – Question 1.      | r all<br>(12) |                             |                   |                        |
|    | Type of Offering Not Applicable   |               | Type of                     |                   | Dollar Amount          |
|    | 1)po or orional   |               | Security                    |                   | Sold                   |
|    | Rule 505  |               | N/A                         | _ \$ _            | N/A                    |
|    | Regulation A  |               | N/A                         | \$                | N/A                    |
|    | Rule 504  |               | N/A                         | _ \$ _            | N/A                    |
|    | Total   |               | N/A                         | _ \$_             | N/A                    |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of issuer. The information may be given as subject to further contingencies. If the amount an expenditure is not known, furnish an estimate and check the box to the left of estimate. | the<br>t of   |                             |                   |                        |
|    | Transfer Agent's Fees   |               |                             | \$_               | -0-                    |
|    | Printing and Engraving Costs  |               |                             | \$                | -0-                    |
|    | Legal Fees  |               | oxtimes                     | \$_               | 29,596                 |
|    | Accounting Fees   |               |                             | \$_               | -0-                    |
|    | Engineering Fees  |               |                             | \$                | -0-                    |
|    | Sales Commissions (specify finders' fees separately)  |               | $\boxtimes$                 | \$_               | 40,914                 |
|    | Other Expenses (identify)   |               |                             | \$                | -0-                    |
|    |   |               |                             | \$ [              | -0-                    |
|    | Total   |               | lacktriangle                | \$ _              | 70,510                 |
|    |   |               |                             |                   |                        |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

|                 | C. OFFERING PRICE   | , NUMBER OF INVESTORS, EXP   | ENSES AND U                                    | E OF PROC                      | EEDS           |                 |
|-----------------|---|--|--|--------------------------------|----------------|-----------------|
|                 | Enter the difference between the aggreg<br>Question 1 and total expenses furnished in<br>is the "adjusted gross proceeds to the issue   | response to Part C - Question 4.a. Th  |  |                                | ę              | 747,766.01      |
|                 |   |  |  |                                | <b>J</b>       | 747,700.01      |
|                 | Indicate below the amount of the adjusted used for each of the purposes shown. If the estimate and check the box to the left of equal the adjusted gross proceeds to the 4.b above. | ne amount for any purpose is not know<br>the estimate. The total of the payment    | n, furnish an<br>is listed must<br>- Questions |                                |                |                 |
|                 |   |  |  | s to Officers,<br>& Affiliates | Pavr           | nents to Others |
|                 | Salaries and Fees   |  |  | -0-                            | ∏ \$           | -0-             |
|                 | Deserting of Desert   |  |  | -0-                            | _ □ * .        | -0-             |
|                 | Purchase, rental or leasing and installation  | on of machinery and equipment  |  | -0-                            | _ U. *.        | -0-             |
|                 | Construction or leasing of plant building   | 7 1 1  | □ ♣  | -0-                            | - □ •.<br>□ \$ | -0-             |
|                 | Acquisition of other businesses (including  | ng the value of securities   | U º  | -0-                            | _ 🗀 🖣          | <del></del>     |
|                 | involved in this offering that may be u   |  |  | _                              |                |                 |
|                 | assets or securities of another issuer purs   | 10700001001001001001001001001  |  | · +0+                          | _ 📙 💲          | -0-             |
|                 | Repayment of indebtedness   |  |  | -0-                            | _ 🔲 💲          | -0-             |
|                 |   |  | L. \$  | -0-                            | _ 🛛 💲          | 747,766.01      |
|                 | •   |  |  | -0-                            | _ ∐ \$ .       | -0-             |
|                 |   |  | \$   | -0-                            | _ □ \$ .       | -0-             |
|                 | Total Payments Listed (column   | totals added)  |  | ⊠ \$                           | 747,766.       | .01             |
| -               |   | D. FEDERAL SIGNATUR  | RE   |                                |                |                 |
| follo<br>of its | issuer has duly caused this notice to be wing signature constitutes an undertaking staff, the information furnished by the iss  | by the issuer to furnish to the U.S. So<br>uer to any non-accredited investor pure | ecurities and Exc                              | hange Commi                    | ission, up     |                 |
|                 | er (Print or Type)  | Signature  | Ďate   |                                |                |                 |
| Natu            | ral Health Trends Corp.   | 1 1 X X 4 A -  | May  | 18, 2007                       |                |                 |
| Vam             | e of Signer (Print or Type)   | Title of Signer (Print or Type)  | <i>V</i>                                       |                                | <del></del>    |                 |
| Chri            | s T. Sharng   | President  |  |                                |                |                 |
|                 | ,   | ATTENTION  |  |                                |                |                 |
| İ               | Intentional misstatements or o  | omissions of fact constitute federal o   | criminal violatio                              | ns. (See 18 U                  | .S.C. 100      | 1.)             |

END